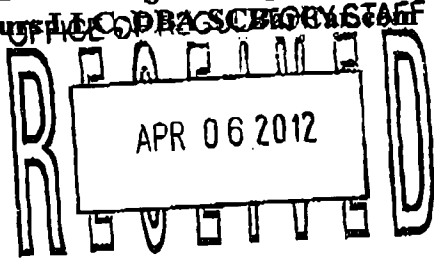


STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

Application for Change of Scope of Authority.  
Trolley Tours LLC DBA SCBOY STAFF



BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2010 - 278 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Joshua Catigano

Address: 64-A Beaufain St.

Charleston, SC 29401

Telephone: 843 323 1150

Fax: 843 725 0425

Other: \_\_\_\_\_

Email: catigano@msn.

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- ☐ Application -- Class C Taxi
- ☐ Application -- Class C Charter
- ☐ Application -- Class C Charter Bus
- ☐ Application -- Class C Non-Emergency
- ☐ Application -- Class E Household Goods
- ☐ Application -- Class E Hazardous Waste
- ☐ Application
- ☐ Request for Extension to Comply with Order
- ☐ Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded
- ☐ Request for Cancellation of Certificate
- ☐ Request for Suspension
- ☐ Request for Reinstatement
- ☐ Request for Name Change on Certificate

- ☒ Request to Amend Scope of Authority
- ☐ Request to Amend Tariff (rate increase, etc.)
- ☐ Request to Amend Passenger Limit
- ☐ Request
- ☐ Exhibit
- ☐ Late-Filed Exhibit
- ☐ Letter
- ☐ Proposed Order
- ☐ Publisher's Affidavit
- ☐ Reservation Letter
- ☐ Response
- ☐ Return to Petition
- ☐ Other: \_\_\_\_\_

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

# CLASS C AMENDMENT FORM

File the original with:

Public Service Commission of South Carolina  
Clerk's Office  
Motor Carrier Matters  
P.O. Box 11649  
Columbia, S.C. 29211  
(803) 896 - 5100  
FAX (803) 896-5199

Mail or fax a copy to:

S.C. Office of Regulatory Staff  
Transportation Department  
1401 Main Street, Suite 900  
Columbia, S.C. 29201  
(803) 737-0578  
FAX (803) 737-0815

DATE: 4-3-12

I have the following Certificate:

☐ Class C Taxi # \_\_\_\_\_ ☒ Class C Charter # 2010-278-T ☐ Class C Charter Bus # \_\_\_\_\_  
*Doc net #*  
*order # 2010-576*  
☐ Class C Non-Emergency # \_\_\_\_\_ *PSC order # 8321*

Please consider this as my request for the following amendment(s) to my Certificate:

☐ Name Change

From: \_\_\_\_\_ DBA: \_\_\_\_\_  
 (Current Name) (Current DBA if applicable)

TO: \_\_\_\_\_ DBA: \_\_\_\_\_  
 (New Name) (New DBA if applicable)

☒ Scope of Authority  
 From: Charleston County To: Statewide  
 (Current Scope) (New Scope)

☐ Passenger Limit  
 From: \_\_\_\_\_ To: \_\_\_\_\_  
 (Current Limit Number) (New Limit Number)

Trolley Tours, LLC  
dba SCBarCar.com  
 Name & DBA if DBA is applicable)

Charleston, SC, 29401  
 (City, State, Zip Code)

843-323-1150  
 (Telephone Number)

164-A Beaufort St.  
 (Street and/or Mailing Address)

[Signature]  
 (Signature)

Owner  
 (Title) Owner, President, etc.